

NEIGHBORHOOD DAMAGE ASSESSMENT FORM

SUMMARY SIDE

1. Event Date/Time ____/____/____; ____:____ 2. Event Type/Name _____

3. Report Date/Time ____/____/____; ____:____ 4. SAFE Team ____ or Neighborhood _____

5. Situation Summary _____

6. Current Situation Summary (summarize from Survey Side)

<i>Send only Item Number and data (6B., 14)</i>	Number, None or Unknown	Comments (not to be transmitted)
6A. Deaths	_____	_____
6B. Injuries	_____	_____
6C. Trapped	_____	_____
6D. Damaged Homes	_____	_____
6E. Damaged Apartments	_____	_____
6F. Damaged Businesses	_____	_____
6G. Damaged Public Buildings	_____	_____
6H. Fires	_____	_____
<i>Send brief description</i>	<i>Describe briefly</i>	
6I. Utility Problems	_____	
6J. Roads Problems	_____	
6K. Evacuations	_____	
6L. Special Needs	_____	
6M. Animal Issues	_____	
6N. Other Critical Information	_____	

7. Prognosis ☐ Improving ☐ No Change ☐ Worsening

8. Prepared By _____